

NEIGHBORHOOD REVITALIZATION PROGRAM

Application to Qualify and Participate

Before the County Appraiser of Doniphan County, Kansas in the matter of qualification of parcel no. _____ for participation in Neighborhood Revitalization Program.

PART I

1. Owner's Name _____
 - a. Owner's Mailing Address _____
 - b. Owner's Day Phone Number _____
2. Property Address _____
3. Legal Description of Property (Attach separate sheet if more space is needed) _____

4. Application Fee \$ _____
5. Building Permit No. (If applicable) _____

Intended Use and Classification of Proposed Improvement (circle word applicable in 6, 7, 8 and 9 below)

6. Residential; Commercial; Industrial; Agricultural; Recreational; Other
7. New; Rehabilitation
8. Rental; Owner Occupied
9. If Residential, Single Family, Multi-Family _____ Number of units.
10. Describe proposed improvements (also attach drawings with dimensions) _____

 - a. Buildings to be razed, if any _____
11. Estimated date of construction to be commenced _____
12. Estimated date of construction to be completed _____
13. Estimated cost of improvements
 - a. Materials \$ _____
 - b. Labor \$ _____
 - c. Total \$ _____

14. Applicant agrees and acknowledges that (a) Applicant has received, read and understand the criteria for qualification and the procedure to be completed to qualify, (b) Applicant will follow all required procedures, (c) within 15 days after completion, Applicant will report such completion to the County Appraiser. (d) If construction is not completed on the January 1st following approval of this application, Applicant will report such facts to County Appraiser prior to January 15th next following (e) any approval issued pursuant to this application becomes null and void one year from date of approval if construction not commenced prior to the expiration of such one year period, and (f) if construction is not completed on the second January 1st following County Appraiser's approval under Part II, then such approval becomes null and void and all construction completed, if any, will not be eligible to participate in the Rebate Program.

*Taxes must be current and kept current to maintain eligibility

Under penalty of perjury, I hereby state that all information contained in the above application is true and correct.

Landowner

Date

PART II

COUNTY APPRIASER'S ACTION ON APPLICATION

Subject to meeting the minimum expenditure requirement of \$5,000.00 and meeting the minimum increase in appraised value directly attributable to the improvement requirement of \$5,000.00, the above application is hereby...

(circle word applicable)

CONDITIONALLY APPROVED

DENIED

County Appraiser

Date